

PETITIONER OR ATTORNEY (Name, state bar number, and address): TELEPHONE NO. (Optional): FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
YOUTH'S NAME: PARENT'S NAME:	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">COMMITMENT TO THE CALIFORNIA YOUTH AUTHORITY</div> <div style="width: 35%;"> CASE NUMBER: JUVENILE: </div> </div>	

1. a. Youth's name:
b. Youth's date of birth:
2. a. Date of hearing: Dept.: Room:
b. Judicial officer (name):
c. Persons present:
☐ Youth ☐ Youth's attorney ☐ Mother ☐ Father ☐ Guardian ☐ Deputy District Attorney
☐ Others as reflected on the attached minute order.

THE COURT FINDS AND ORDERS:

3. The youth was under the age of 18 years at the time of the commission of the offense for which the youth is being committed to the California Youth Authority.
4. The mental and physical condition and qualifications of this youth render it probable that the youth will benefit from the reformatory discipline or other treatment provided by the California Youth Authority.
5. a. ☐ The youth is committed to the California Youth Authority for a 90-day period of observation and diagnosis.
 b. ☐ The youth is committed to the California Youth Authority for acceptance.
 c. ☐ The youth is a ward of the California Youth Authority under a prior commitment; and
 ☐ is recommitted to the Youth Authority; or
 ☐ is returned to the Youth Authority with the following recommendation:
 ☐ the parole status of the youth be revoked;
 ☐ the parole status of the youth not be revoked; or
 ☐ the parole status of the youth will be determined by the Youth Authority.
6. The youth has been declared a ward of the court and is committed based on the following sustained petitions:

<u>Sustained</u>	<u>Petition Date</u>	<u>Offense</u>	<u>Code</u>	<u>Degree</u>	<u>707(b)</u>	<u>Enhancement</u>	<u>Term</u>
a.							
b.							

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	<u>Sustained</u>	<u>Petition Date</u>	<u>Offense</u>	<u>Code</u>	<u>Degree</u>	<u>707(b)</u>	<u>Enhancement</u>	<u>Term</u>
6. c.								

d.

e.

☐ Continued on attachment 6.

7. The youth has credit for _____ days in secure custody.

8. The maximum period of confinement is *(state years and months)*:

9. The youth is ordered to pay a restitution fine of *(state dollar amount)*:

10. ☐ The youth is ordered to pay victim restitution as stated on attachment 10.

11. Exceptional needs:

a. ☐ The youth is an individual with exceptional needs.

b. ☐ Educational records do not indicate that a determination has been made regarding any exceptional needs the youth may have.

c. ☐ The youth has an individualized education program and it:
☐ is included as attachment 11c.
☐ will be furnished to the Youth Authority when obtained.

12. ☐ The court requests that the youth be considered for the _____ Program.

13. ☐ The court requests that a copy of the Clinical Summary Report be sent to the youth's attorney *(provide name and address of attorney)*:

14. The Probation Officer is directed to forward a copy of the youth's medical records to the Director of the Youth Authority prior to delivery.

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15. Youth ☐ has ☐ has not been prescribed psychotropic medication.
Type and dosage of medication (*specify*):

☐ Additional documentation provided in attachment 15.

16. Such psychotropic medication, if still necessary based on an evaluation by a Youth Authority physician, may be continued by the Youth Authority for a period not to exceed 60 days from the date of delivery to the Youth Authority reception center and clinic.

Date:

JUDICIAL OFFICER